



NIP-277-03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

H. KAWAMOTO et al.

Serial No. 10/629,568

Group Art Unit: 2832

Filed: July 30, 2003

Examiner: FISHMAN, MARINA

For: GAS-INSULATED SWITCH

REQUEST FOR APPROVAL OF PROPOSED DRAWING CORRECTIONS

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The applicants request approval of the proposed drawing corrections shown in red ink on the attached copies of Figs. 1, 2, 5 and 6.

Respectfully submitted,

Gene W. Stockman
Registration No. 21,021
Attorney for Applicant

MATTINGLY, STANGER & MALUR
1800 Diagonal Road, Suite 370
Alexandria, Virginia 22314
(703) 684-1120
Date: May 20, 2004



PATENT

Case Docket No. NIP-277-03

In RE application of H. KAWAMOTO et al.

Serial No.: 10/629,568

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For: GAS-INSULATED SWITCH

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
- ☐ No additional fee is required.

The fee has been calculated as shown below:

(COL. 1)		(COL. 2)		(COL. 3)
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra
Total	* 1	Minus	** 20	= 0
Indep.	* 1	Minus	*** 3	= 0
<input type="checkbox"/> First Presentation of Multiple Dependent Claims				

SMALL ENTITY

Rate	Additional Fee
x 9	\$
x 42	\$
+ 140	\$
Total	\$

OR

OTHER THAN A SMALL ENTITY

Rate	Additional Fee
x 18	\$ 0
x 84	\$ 0
+ 280	\$ 0
Total	\$ 0

OR

- * If the entry in Col. 1 is less than the entry in Col. 2, write '0' in Col. 3.
- ** If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, write '20' in this space.
- *** If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, write '3' in this space.
- The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

- ☐ Please charge my Deposit Account No. 50-1417 in the amount of \$ _____.
- ☒ A check in the amount of \$ 950.00 is attached in payment of:
PETITION FOR A THREE-MONTH EXTENSION OF TIME
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1417.
- ☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR 1.17.
- ☒ Any Extension of Time fees that are necessary, which are hereby requested if necessary.

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1800 Diagonal Rd., Suite 370
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Date: May 20, 2004

By:

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